

**Town of Gilbert**  
**NOTICE OF IDENTITY THEFT**

Party Submitting the Information (Consumer)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Details of alleged ID theft: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Customer Signature: \_\_\_\_\_

\*\*\*\*\*

Date and Time of Receipt: \_\_\_\_\_

Verification of Consumer Identity: \_\_\_\_\_

Documents Received:  FTC Affidavit  Police Report

I acknowledge receipt of this notice. The information has been reported as resulting from identity theft.

Employee Signature: \_\_\_\_\_

For Office Use Only:

\_\_\_\_\_ Account activity has been blocked

\_\_\_\_\_ Account activity has not been blocked for the following reason(s): \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_